## Case 16-82148 Doc 1 Filed 09/13/16 Entered 09/13/16 11:32:54 Desc Main Document Page 1 of 47

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

### Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identity Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Bring iden	e the name that is on a government-issued ure identification (for mple, your driver's use or passport).  g your picture tification to your sting with the trustee.	Dennis First name  M. Middle name  Schramm  Last name and Suffix (Sr., Jr., II, III)	Kathleen First name  J. Middle name  Schramm Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-8984	xxx-xx-9150

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Debtor 1 Dennis M. Schramm
Debtor 2 Kathleen J. Schramm

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	■ I have not used any business name or EINs.  Business name(s)  EINs			
5.	Where you live	1020 Somerset Mall	If Debtor 2 lives at a different address:			
		McHenry, IL 60050  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		McHenry				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 2 Kathleen J. Schramm Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When Case number District When Case number District When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ☐ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this 

bankruptcy petition.

Dennis M. Schramm

Debtor 1

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Deb	otor 2 Kathleen J. Schra	mm			Case number (if known)		
Par	t 3: Report About Any Bu	sinesses	You Own	as a Sole Proprie	etor		
12.	Are you a sole proprietor						
	of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of bus	siness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	tte & ZIP Code		
	it to this petition.		Check	the appropriate bo	ox to describe your business:		
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Rea	l Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as d	defined in 11 U.S.C. § 101(53A))		
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))		
				None of the above	е		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statem operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procint 11 U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am n	ot filing under Chap	pter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ling under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	, Hazardo	us Property or An	by Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat	☐ Yes.					
	of imminent and identifiable hazard to	□ res.	What is t	he hazard?			
	public health or safety? Or do you own any						
	property that needs immediate attention?			iate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	Number, Street, City, State & Zip Code		

Dennis M. Schramm

Debtor 1

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Debtor 1 Dennis M. Schramm

Debtor 2 Kathleen J. Schramm

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-82148 Doc 1 Filed 09/13/16 Entered 09/13/16 11:32:54 Desc Main Document Page 6 of 47

Debtor 2 Kathleen J. Schramm				Case number (if known)					
Par	t 6: Answer These Questi	ions for Re	porting Purposes						
16.	What kind of debts do you have?		16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as individual primarily for a personal, family, or household purpose."						
			☐ No. Go to line 16b.						
			■ Yes. Go to line 17.						
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c. -	State the type of debts you owe th	nat are not consumer debt	s or business of	debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	o to line 18.					
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	_ 103.	I am filing under Chapter 7. Do yo are paid that funds will be availab  No Yes			y is excluded and administrative expenses			
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000			
19.	How much do you estimate your assets to be worth?	□ \$100,0	50,000 11 - \$100,000 101 - \$500,000 101 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million		☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you estimate your liabilities to be?	□ \$100,0	50,000 01 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million		□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion			
Par	t 7: Sign Below								
For	you	I have exa	amined this petition, and I declare	under penalty of perjury th	nat the informat	tion provided is true and correct.			
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.							
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I request r	elief in accordance with the chapt	er of title 11, United States	s Code, specifi	ed in this petition.			
I understand making a false statement, concealing property, or obtated bankruptcy case can result in fines up to \$250,000, or imprisonment and 3571.									
		Dennis I	is M. Schramm M. Schramm of Debtor 1	Kathle	thleen J. Scheen J. Schraure of Debtor 2	mm			
		Executed	on September 13, 2016 MM / DD / YYYY	Execut		ember 13, 2016 DD / YYYY			

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Debtor 1	Dennis M. Schrar	Document Document	Page 7 of 47		
Debtor 2	Kathleen J. Schra	amm	Cas	se number (if known)	
•	attorney, if you are ed by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit	ed States Code, and have	explained the relief a	vailable under each chapter
•	not represented by ey, you do not need s page.	for which the person is eligible. I also certify and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.		\ <i>\</i>	. , , , ,
		/s/ Scott A. Bentley	Date	September 13,	2016

13/ SCOULA. Dellu	еу	Date	September 13, 2010
Signature of Attorne	y for Debtor		MM / DD / YYYY
Scott A. Bentley			
Printed name			
Law Office of Sco	ott A. Bentley		
Firm name			
5435 Bull Valley	Road Suite 318		
McHenry, IL 6005			
Number, Street, City, State			
Contact phone 815-3	85-0669	Email address	scottbentleylaw@gmail.com
6191377			
Bar number & State			<del></del>

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			Faut O UI 41		
Fill in this infor	mation to identify your	case:			
Debtor 1	Dennis M. Schrar	nm			
	First Name	Middle Name	Last Name		
Debtor 2 Kathleen J. Schramm					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an
(·· ·····-					amended filing

### Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

2/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	37,146.74
	1c. Copy line 63, Total of all property on Schedule A/B	\$	37,146.74
Pa	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	21,633.08
	Your total liabilities	\$	21,633.08
Pa	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,938.65
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,321.43
Pa:	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		

the court with your other schedules.

Official Form 106Sum

Summary of You

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

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Case number (if known)

Document Debtor 1 Dennis M. Schramm Debtor 2

Kathleen J. Schramm

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,423.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

	C	ase 16-82148 [	Doc 1	Filed 09/3		Entered 09/13/3	16 11:32:54	Des	c Main
Fill in t	his info	rmation to identify your	case and			1 mm. 10 m = 1			
Debtor	1	Dennis M. Schrar	nm						
		First Name		ldle Name		Last Name			
Debtor 2 (Spouse, i		Kathleen J. Schra		Idle Name		Last Name			
United S	States E	Bankruptcy Court for the:	NORTHE	RN DISTRICT	OF ILLIN	NOIS			
Case nı	umber					-			Check if this is an amended filing
									amenaea ming
Offici	ial F	orm 106A/B							
Sch	edu	le A/B: Prop	erty						12/15
hink it fir nformati Answer e	ts best. on. If me every qu	Be as complete and accura ore space is needed, attach	ite as possi a separate	ible. If two marrions sheet to this for	ed people rm. On the	in asset fits in more than on are filing together, both are top of any additional page on or Have an Interest In	e equally responsib	le for supp	olying correct
		r have any legal or equitable							
		, , ,	e mieresi n	rany residence,	building,	iand, or similar property?			
_	. Go to P								
⊔ Yes	s. wnere	e is the property?							
Part 2:	Describ	e Your Vehicles							
someone	e else d		e, also rep	oort it on Sched	lule G: Ex	whether they are register recutory Contracts and Un		e any veh	icles you own that
□ No		•							
■ Ye									
<b>—</b> 16	3								
3.1 N	Лаke:	Honda	,	Who has an inte	rest in the	e property? Check one			ns or exemptions. Put claims on Schedule D:
N	Model:	Oddyssy		Debtor 1 only					Secured by Property.
	ear:	2015		Debtor 2 only			Current value of		Current value of the
		ate mileage: prmation:		■ Debtor 1 and I ■ At least one of		•	entire property	?	portion you own?
-		n: 1020 Somerset Ma		☐ At least one of	the debto	ors and another			
		ry IL 60050	-	Check if this (see instructions		unity property	\$30,00	00.00	\$30,000.00
	ples: Bo					cles, other vehicles, and owmobiles, motorcycle ac			
						om Part 2, including any			\$30,000.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Dalatan 4	Document Page 11 c	of 47
Debtor 1 Debtor 2		Case number (if known)
<i>Examp</i> □ No	sehold goods and furnishings umples: Major appliances, furniture, linens, china, kitchenware	
	Household Goods and Furnishings Location: 1020 Somerset Mall, McHenry IL 60050	\$2,000.0
■ No	amples: Televisions and radios; audio, video, stereo, and digital equipment; computer including cell phones, cameras, media players, games	ters, printers, scanners; music collections; electronic devices
Examp ■ No	ectibles of value  Imples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other collections, memorabilia, collectibles	or other art objects; stamp, coin, or baseball card collections
Examp  No	ipment for sports and hobbies  Imples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool ta musical instruments  No  Yes. Describe	tables, golf clubs, skis; canoes and kayaks; carpentry tools;
□ No	ramples: Pistols, rifles, shotguns, ammunition, and related equipment	
	Firearms, sports equipment, bicycles. Location: 1020 Somerset Mall, McHenry IL 60050	\$450.0
☐ No	ramples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	Wearing Apparel Location: 1020 Somerset Mall, McHenry IL 60050	\$500.0
☐ No	ramples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirlo	rloom jewelry, watches, gems, gold, silver
	Furs and Jewelry Location: 1020 Somerset Mall, McHenry IL 60050	\$4,000.0
Exam ■ No	n-farm animals  camples: Dogs, cats, birds, horses  No  'es. Describe	
■ No	y other personal and household items you did not already list, including any he lo 'es. Give specific information	health aids you did not list

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Debtor 1			Occasional and the	
Debtor 2	Kathleen J. Schr	amm	Case number (if know	n) 
			art 3, including any entries for pages you have attached	\$6,950.00
Part 4:	Describe Your Financial A	ssets		
		or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	mples: Money you have	in your wallet, in your hor	me, in a safe deposit box, and on hand when you file your pe	tition
	institutions. If you		unts; certificates of deposit; shares in credit unions, brokerag with the same institution, list each.	e houses, and other similar
	S		Institution name:	
		:.1. Checking	Chase 2911 Commerce Drive Johnsburg, IL 60051	\$196.74
Exai ■ No			kerage firms, money market accounts	
	publicly traded stock a	and interests in incorpo	orated and unincorporated businesses, including an inter	est in an LLC, partnership, and
■ No				
☐ Ye	s. Give specific informat	tion about them Name of entity:	% of ownership:	
Neg Non ■ No	otiable instruments inclu -negotiable instruments	de personal checks, cast are those you cannot tran	tiable and non-negotiable instruments hiers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.	
	ement or pension accomples: Interests in IRA, E		03(b), thrift savings accounts, or other pension or profit-sharir	ng plans
■ No □ Ye	s. List each account sep	arately.	Institution name:	
Youi <i>Exai</i>	rity deposits and preparations of all unused deposits. Agreements with	ayments oosits you have made so	that you may continue service or use from a company public utilities (electric, gas, water), telecommunications comp	panies, or others
■ No			Institution name or individual:	
	s uities (A contract for a po	eriodic payment of mone	y to you, either for life or for a number of years)	
■ No			, , , ,	
☐ Ye	s Issuer r	name and description.		
26 U.	S.C. §§ 530(b)(1), 529A	<b>A, in an account in a qu</b> (b), and 529(b)(1).	ualified ABLE program, or under a qualified state tuition բ	orogram.
■ No □ Ye		on name and description	. Separately file the records of any interests.11 U.S.C. § 521	(c):
-				

		Case 16-82148		Filed 09/13/16 Document	Entered 09/13/16 11:32:54 Page 13 of 47	Desc Main
	ebtor 1 ebtor 2	Dennis M. Schramm Kathleen J. Schram			Case number (if known)	
25.	■ No	, equitable or future inter		rty (other than anything	g listed in line 1), and rights or powers exe	rcisable for your benefit
26.	Exam <sub>l</sub> ■ No	s, copyrights, trademark oles: Internet domain name Give specific information	es, websites, p			
27.	Exam <sub>l</sub> ■ No	es, franchises, and other oles: Building permits, excluding Sive specific information	lusive licenses,		n holdings, liquor licenses, professional license	es
M	oney or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	■ No	funds owed to you  Give specific information a	about them, inc	cluding whether you alrea	ady filed the returns and the tax years	
29.	Exam <sub>l</sub> ■ No	support ples: Past due or lump sun Give specific information		usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
30.	Exam <sub>l</sub> ■ No	amounts someone owes bles: Unpaid wages, disabi benefits; unpaid loan Give specific information.	ility insurance p s you made to		efits, sick pay, vacation pay, workers' comper	nsation, Social Security
31.		sts in insurance policies poles: Health, disability, or li	ife insurance; h	nealth savings account (H	HSA); credit, homeowner's, or renter's insurar	ice
		Name the insurance comp Cor	pany of each ponpany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
	If you somed	terest in property that is are the beneficiary of a livi one has died.  Give specific information.	ng trust, expec		d surance policy, or are currently entitled to rece	eive property because
33.	Exam <sub>l</sub> ■ No	s against third parties, wholes: Accidents, employments Describe each claim	ent disputes, ins		t or made a demand for payment to sue	
34.	■ No	contingent and unliquida		every nature, including	g counterclaims of the debtor and rights to	set off claims
35.	■ No	nancial assets you did no	•			

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Dahtar 4	Donnic M. Schramm	ment Paye 14 or	47	
Debtor 1 Debtor 2	Dennis M. Schramm Kathleen J. Schramm		Case number (if known)	
	the dollar value of all of your entries from Part 4, i			\$196.74
Part 5: De	escribe Any Business-Related Property You Own or Have	an Interest In. List any real est	ate in Part 1.	
37. <b>Do you</b>	own or have any legal or equitable interest in any busine	ess-related property?		
No. G	o to Part 6.			
☐ Yes.	Go to line 38.			
	escribe Any Farm- and Commercial Fishing-Related Prop you own or have an interest in farmland, list it in Part 1.	erty You Own or Have an Intere	st In.	
	u own or have any legal or equitable interest in an	y farm- or commercial fishi	ng-related property?	
■ No	. Go to Part 7.			
☐ Ye	s. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in	That You Did Not List Above		
Exam ■ No	u have other property of any kind you did not already ples: Season tickets, country club membership  Give specific information	ady list?		
54. <b>Add</b>	the dollar value of all of your entries from Part 7. \	Write that number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. <b>Part</b>	1: Total real estate, line 2			\$0.00
56. <b>Part</b>	2: Total vehicles, line 5	\$30,000.00	_	
57. <b>Part</b>	3: Total personal and household items, line 15	\$6,950.00		
58. <b>Part</b>	4: Total financial assets, line 36	\$196.74		
59. <b>Part</b>	5: Total business-related property, line 45	\$0.00		
60. <b>Part</b>	6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>Part</b>	7: Total other property not listed, line 54	+\$0.00		
62. <b>Tota</b>	I personal property. Add lines 56 through 61	\$37,146.74	Copy personal property total	\$37,146.74
63. Tota	l of all property on Schedule A/B Add line 55 + line	62		\$37 1 <i>4</i> 6 7 <i>4</i>

Official Form 106A/B Schedule A/B: Property page 5

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		BOOM	$\frac{1}{1}$	
Fill in this infor	mation to identify your	case:		
Debtor 1	Dennis M. Schrar	nm		
	First Name	Middle Name	Last Name	
Debtor 2	Kathleen J. Schra	amm		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemp	ptions are you	claiming? C	heck one only,	even if your	spouse is filing	g with	you.
----	--------------------	----------------	-------------	----------------	--------------	------------------	--------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only o	one box for each exemption.	
Household Goods and Furnishings Location: 1020 Somerset Mall.	\$2,000.00	<b>.</b>	\$2,000.00	735 ILCS 5/12-1001(b)
McHenry IL 60050 Line from <i>Schedule A/B</i> : <b>6.1</b>			of fair market value, up to oplicable statutory limit	
Firearms, sports equipment, bicycles.	\$450.00		\$450.00	735 ILCS 5/12-1001(b)
Location: 1020 Somerset Mall, McHenry IL 60050 Line from <i>Schedule A/B</i> : 10.1			of fair market value, up to oplicable statutory limit	
Wearing Apparel Location: 1020 Somerset Mall,	\$500.00	<b>.</b>	\$500.00	735 ILCS 5/12-1001(a)
McHenry IL 60050 Line from Schedule A/B: 11.1			of fair market value, up to oplicable statutory limit	
Furs and Jewelry Location: 1020 Somerset Mall,	\$4,000.00	•	\$4,000.00	735 ILCS 5/12-1001(b)
McHenry IL 60050 Line from Schedule A/B: 12.1			of fair market value, up to oplicable statutory limit	
Checking: Chase 2911 Commerce Drive	\$196.74	<b>.</b>	\$196.74	735 ILCS 5/12-1001(b)
Johnsburg, IL 60051 Line from <i>Schedule A/B</i> : 17.1			of fair market value, up to oplicable statutory limit	

Debtor 1
Debtor 2
Dennis M. Schramm
Kathleen J. Schramm
Case number (if known)

3. Are you claiming a homestead exemption of more than \$160,375?
(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)
No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

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Yes

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Fill in this infor	mation to identify your	case:		
Debtor 1	Dennis M. Schrar	nm		
	First Name	Middle Name	Last Name	
Debtor 2	Kathleen J. Schra	amm		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing

### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

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Fill in this info	ormation to identify your			
Debtor 1	Dennis M. Schran	nm		
20010. 1	First Name	Middle Name	Last Name	
Debtor 2	Kathleen J. Schra	ımm		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Ea	rm 106E/F			
		ha Haya Uncasurad	Claima	12/15
		ho Have Unsecured	Claims Y claims and Part 2 for creditors with NONPRIO	
Schedule D: Cre eft. Attach the C name and case i	ditors Who Have Claims Sec	ured by Property. If more space is r le. If you have no information to rep	o not include any creditors with partially secure needed, copy the Part you need, fill it out, numb nort in a Part, do not file that Part. On the top of	er the entries in the boxes on the
1. Do any cred	ditors have priority unsecure	d claims against you?		
■ No. Go t	o Part 2.			
☐ Yes.				
Part 2: List	All of Your NONPRIORIT	Y Unsecured Claims		
3. Do any cred	ditors have nonpriority unsec	cured claims against you?		
☐ No. You	have nothing to report in this pa	art. Submit this form to the court with	your other schedules.	
Yes.				
unsecured o	claim, list the creditor separately	y for each claim. For each claim listed	e creditor who holds each claim. If a creditor has, identify what type of claim it is. Do not list claims a have more than three nonpriority unsecured claims	already included in Part 1. If more
				Total claim
4.1 Alder	n Management Service	, Inc. Last 4 digits of acco	ount number	\$544.98
4200	ority Creditor's Name W. Pterson Avenue ago, IL 60646	When was the debt	incurred?	
	r Street City State Zlp Code	As of the date you f	ile, the claim is: Check all that apply	
Who in	curred the debt? Check one.	-		
☐ Deb	otor 1 only	☐ Contingent		
☐ Deb	otor 2 only	☐ Unliquidated		
■ Deb	otor 1 and Debtor 2 only	□ Disputed		
_	east one of the debtors and and	- '	ITY unsecured claim:	
	eck if this claim is for a comm	По		
debt	claim subject to offset?	<u> </u>	g out of a separation agreement or divorce that you	u did not
■ No	000,000 10 0110001		or profit-sharing plans, and other similar debts	
☐ Yes		Other, Specify	, , , , , , , , , , , , , , , , , , , ,	
- res	)	Other, Specify		

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Debtor 1 Dennis M. Schramm

Debt	or 2 Kathleen J. Schramm	Case number (if know)				
4.2	Amazon	Last 4 digits of account number	\$1,080.91			
	Nonpriority Creditor's Name P.O. Box 960013 Orlando, FL 32896-0013	When was the debt incurred?				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
4.3	Barclay Card Services Nonpriority Creditor's Name	Last 4 digits of account number	\$3,428.38			
	P.O. Box 13337 Philadelphia, PA 19101-3337	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Credit card purchases				
4.4	Capital One Services	Last 4 digits of account number 1337	\$2,244.22			
	Nonpriority Creditor's Name P.O. Box 247001 Omaha, NE 68124-7001	When was the debt incurred?				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Credit card purchases				

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Debte	or 2 Kathleen J. Schramm	Case number (if know)				
4.5	Centegra Hospital	Last 4 digits of account number 0001	\$1,288.00			
	Nonpriority Creditor's Name P.O. Box 6204	When was the debt incurred?				
	Carol Stream, IL 60132					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Medical Services				
4.6	Centegra Hospital	Last 4 digits of account number 8790	\$1,314.60			
	Nonpriority Creditor's Name		. ,			
	P.O. Box 6204	When was the debt incurred?				
	Carol Stream, IL 60132  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	□ Unliquidated				
	■ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Medical Services				
4.7	Citibank	Last 4 digits of account number 2138	\$932.93			
	Nonpriority Creditor's Name 4740 121st.	When was the debt incurred?				
	Urbandale, IA 50323  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	The of the date year me, the stanner of look an that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Credit card purchases				

Debtor 1 Dennis M. Schramm

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Debtor 1 Dennis M. Schramm

Debtor 2 Kathleen J. Schramm		Case number (if know)	
4.8	Credit One	Last 4 digits of account number 4409	\$495.15
	Nonpriority Creditor's Name  585 Pilot Road	When was the debt incurred?	
	Las Vegas, NV 89119 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card purchases	
4.9	H & R Accounts	Last 4 digits of account number 5000	\$4,500.00
	Nonpriority Creditor's Name 7017 John Deere Parkway	When was the debt incurred?	
	Moline, IL 61266-0672  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	No	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Services	
	Li Tes	Other. Specify Wedical Selvices	
4.1 0	Home Depot Credit Services	Last 4 digits of account number 6072	\$297.09
	Nonpriority Creditor's Name P.O. Box 790328	When was the debt incurred?	
	Saint Louis, MO 63179  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	No	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	

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Debtor 2	Kathleen	J. Schramm		Case	number (if know)				
4.1	_			007	•	40.540.00			
1   Pr	•	nding LLC	Last 4 digits of account number	2672	<u></u>	\$3,512.38			
	onpriority Cred		When was the debt incurred?						
		sco, CA 94105				<u> </u>			
		City State ZIp Code	As of the date you file, the claim	n is: Chec	k all that apply				
Wh	no incurred t	he debt? Check one.							
	Debtor 1 only	у	☐ Contingent						
	Debtor 2 onl	у	☐ Unliquidated						
	Debtor 1 and	d Debtor 2 only	☐ Disputed						
	At least one	of the debtors and another	Type of NONPRIORITY unsecur	ed claim:					
	Check if this	s claim is for a community	☐ Student loans						
del	bt	•	Obligations arising out of a sep	paration a	greement or divorce that you did no	ot			
ls t	the claim sul	bject to offset?	report as priority claims						
	No		Debts to pension or profit-shar	ing plans,	, and other similar debts				
	Yes		Other. Specify			<u> </u>			
4.1 W:	almart Cre	edit Card	Local Addition of account assumb	. 0080	n	\$1.994.44			
	npriority Cred		Last 4 digits of account number	- 0000	<u>,                                      </u>	Ψ1,334.44			
	O. Box 53		When was the debt incurred?						
		30353-0927							
		City State ZIp Code he debt? Check one.	As of the date you file, the claim	is: Chec	k all that apply				
	Debtor 1 only								
_			Contingent						
	Debtor 2 onl		Unliquidated						
	Debtor 1 and	d Debtor 2 only	☐ Disputed						
	At least one	of the debtors and another	Type of NONPRIORITY unsecur	ed claim:					
		s claim is for a community	Student loans						
del Is t		bject to offset?	☐ Obligations arising out of a sepreport as priority claims	paration a	greement or divorce that you did no	ot			
	No		Debts to pension or profit-shar	ing plans,	, and other similar debts				
	Yes		Other. Specify Credit car	■ Other. Specify Credit card purchases					
Part 3:	List Others	s to Be Notified About a De	ebt That You Already Listed						
is trying to	o collect from	m you for a debt you owe to s	about your bankruptcy, for a debt that comeone else, list the original creditor at you listed in Parts 1 or 2, list the ad- or submit this page.	in Parts 1	1 or 2, then list the collection age	ency here. Similarly, if you			
Name and A	Address		On which entry in Part 1 or Part 2 did yo	u list the	original creditor?				
•		Associates, Ltd.	Line <u>4.3</u> of ( <i>Check one</i> ):	☐ Part 1:	: Creditors with Priority Unsecured	Claims			
	tison Stre	- <del>-</del> -	I	Part 2:	: Creditors with Nonpriority Unsecu	red Claims			
wiimingt	ton, DE 19	0001-3146	Last 4 digits of account number	6	345				
Part 4:	Add the Ar	mounts for Each Type of U	Insecured Claim						
	amounts of	71	aims. This information is for statistical	reporting	g purposes only. 28 U.S.C. §159.	Add the amounts for each			
					Total Claim				
	6a.	Domestic support obligation	ns	6a.		.00			
Tota	al	3			·	· <del>···</del>			
claims from Part 1		Taxes and certain other deb	ts you owe the government	6b.	\$ 0.	00			
	6c.		I injury while you were intoxicated	6c.	·	. <u>00</u> .00			
	6d.	•	nsecured claims. Write that amount here.	6d.		.00			
					·	· <del>···</del>			
	6e.	Total Priority. Add lines 6a th	rough 6d.	6e.	s 0	00			

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Debtor 1 Dennis M. Schramm
Debtor 2 Kathleen J. Schramm

Case number (if know)

					Total Claim
Total	6f.	Student loans	6f.	\$_	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$_	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.		\$	21,633.08
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$_	21,633.08

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			$\frac{1}{1}$	
Fill in this infor	mation to identify your	case:		
Debtor 1	Dennis M. Schrar	nm		
	First Name	Middle Name	Last Name	
Debtor 2	Kathleen J. Schra	amm		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an
				amended filing

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Honda Financial P.O. Box 5308 Elgin, IL 60121	2015 Honda Oddyssy Leased Vehicle

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	Docume	ent Page 25 d	of 47
information to identify your	case:		
Dennis M. Schra	mm		
First Name	Middle Name	Last Name	
Kathleen J. Schr	amm		
ng) First Name	Middle Name	Last Name	
tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
ber			
			☐ Check if this is an
			amended filing
I Form 106H			
lule H: Your Cod	ebtors		12/15
			<u> </u>
			e as a codebtor.
3			
Go to line 3.			
s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?	
e 2 again as a codebtor only 106D), Schedule E/F (Officia olumn 2.	if that person is a guaran	tor or cosigner. Make	sure you have listed the creditor on Schedule D (Official
	IP Code		Check all schedules that apply:
			☐ Schedule D, line
Name			☐ Schedule E/F, line
			☐ Schedule G, line
	State	7IP Code	
Oity	State	Zii Gode	
			☐ Schedule D, line
Name			☐ Schedule E/F, line
			☐ Schedule G, line
N			
	State	ZIP Code	
	Dennis M. Schrai First Name Kathleen J. Schra First Name Attes Bankruptcy Court for the: Attendance Bankruptcy Court for the: Attendanc	Dennis M. Schramm First Name Middle Name Kathleen J. Schramm Middle Name Middl	Dennis M. Schramm First Name Middle Name Last Name Kathleen J. Schramm First Name Middle Name Last Name Middle

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Eill	in this information to identify your o	220.				1			
	otor 1 Dennis M. S								
Del	otor 2 Kathleen J.				_				
	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS						
Cas (If kr	se number nown)		-				led filing nent showir	ng postpetition following date:	
	fficial Form 106l chedule I: Your Inc					MM / DD/	YYYY		
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	i are married and not fili ur spouse is not filing w On the top of any additi	ng jointly, and your ith you, do not inclu	spouse ude infor	is liv mati	ing with you, inc on about your sp	lude infor ouse. If m	mation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor	2 or non-f	iling spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ■ Not employed			□ Emp	employed		
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Pai	t 2: Give Details About Mo	nthly Income							
spoi If yo	mate monthly income as of the cuse unless you are separated.  u or your non-filing spouse have me space, attach a separate sheet to	ore than one employer, co	,	·			on on the l	·	J
						TO DEDICT 1		ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	0.00	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	0.00	\$	0.00	

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	tor 1 tor 2	Dennis M. Schramm Kathleen J. Schramm	_		Case	e number ( <i>if know</i>	n)				
					Fo	r Debtor 1			or Debtor		
	Cop	by line 4 here	4.		\$_	0.0	0	\$		0.00	-
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	a.	\$	0.0	0	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5b	).	\$	0.0	_	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	50	<b>.</b>	\$	0.0	0	\$		0.00	_
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.0	0	\$		0.00	_
	5e.	Insurance	5e	€.	\$	0.0	0	\$		0.00	_
	5f.	Domestic support obligations	5f.		\$	0.0	0	\$		0.00	
	5g.	Union dues	5g	J.	\$_	0.0	0	\$		0.00	_
	5h.	Other deductions. Specify:	5h	1.+	\$_	0.0	0	+ \$		0.00	_
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	0.0	0	\$		0.00	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	0.0	0	\$		0.00	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	a.	\$	0.0	n	\$		0.00	
	8b.	Interest and dividends	8b		\$-	0.0	_	\$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$	0.0		\$		0.00	_
	8d.	Unemployment compensation	80	d.	\$	0.0	0	\$		0.00	_
	8e.	Social Security	8e	€.	\$	1,651.0	0	\$		772.00	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  Pension or retirement income	e 8f. 8g		\$_ \$	0.0 1,515.6		\$		0.00	_
	8h.	Other monthly income. Specify:		1.+	\$			+ \$		0.00	_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	3,166.6	5	\$		772.0	0
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		3,166.65 +	\$		772.00	- S	3,938.65
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				0,100.00			772.00		0,000.00
11.	Incl othe	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	r depe						Schedule	∋ J. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The respective that amount on the Summary of Schedules and Statistical Summary of Certailies								\$	3,938.65
13.	Do :	you expect an increase or decrease within the year after you file this form No.	1?							Combi	ned ly income
	П	Yes. Explain:									

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						_		
Fill in th	is informa	tion to identify y	our case:					
Debtor 1		Dennis M. S	chramm			Ch	eck if this is:	
					_		An amended filing	•
Debtor 2 (Spouse,		Kathleen J.	Schramm	1				wing postpetition chapter f the following date:
(Spouse,	ii iiiiig)						TO expenses as e	Title following date.
United St	tates Bankr	uptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Case nur								
(If known	1)							
Offic	ial Fo	rm 106J						
		J: Your	Exper	ISAS				12/1
Be as c	omplete a ation. If m r (if know	and accurate as ore space is ne n). Answer eve	s possible. eeded, atta ery questio	. If two married people anch another sheet to this				for supplying correct
Part 1:	Descr this a join	ibe Your House	ehold					
_	No. Go to							
			in a sonar	ate household?				
_			iii a sepaii	ate nousenoia :				
	■ N □ Y	_	st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of De	ehtor 2	
		co. Dobtor 2 ma	ot the Onto	arr 61111 1000 2, <i>Exponde</i>	To Coparate Flouse	5/10/d 0/ D	55101 2.	
2. <b>Do</b>	you have	e dependents?	■ No					
	not list Dobtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
Do	not state	the						□ No
de	pendents	names.						☐ Yes
								□ No
								Yes
								□ No
								_ □ Yes □ No
								□ No □ Yes
3. <b>Do</b>	your exp	enses include	_	No				_ La res
ex	penses of	f people other t d your depende	than 🗖	Yes				
Part 2:	Estim	ate Your Ongo	ing Month	y Expenses				
expens				uptcy filing date unless y y is filed. If this is a supp				apter 13 case to report of the form and fill in the
the valu	•	n assistance an		government assistance i	,		Your ex	penses
,5.11010		<del>,</del>						
		or home owners and any rent for the		ses for your residence. I or lot.	nclude first mortgag	e 4.	\$	1,400.00
lf r	not includ	ed in line 4:						
4a.	. Real e	estate taxes				4a.	\$	0.00
4b.		rty, homeowner'	s, or renter	's insurance		4b.	·	0.00
4c.	•	•		ıpkeep expenses		4c.		0.00
4d.		owner's associa				4d.	·	0.00
5. Ad	lditional r	nortgage paym	ents for vo	our residence, such as ho	me equity loans	5.	\$	0.00

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	nis M. Schramm lleen J. Schramm	Case num	ber (if known)	
Utilities:				
	ricity, heat, natural gas	6a.	\$	150.00
6b. Wate	r, sewer, garbage collection	6b.	\$	67.75
6c. Telep	phone, cell phone, Internet, satellite, and cable services	6c.	\$	137.68
6d. Other	r. Specify:	6d.	\$	0.00
Food and h	nousekeeping supplies	7.	·	400.00
	and children's education costs		·	0.00
	aundry, and dry cleaning	9.	· -	0.00
	are products and services	10.	·	40.00
	d dental expenses	11.	\$	172.00
	tion. Include gas, maintenance, bus or train fare.	12.	\$	90.00
	de car payments. ent, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
	contributions and religious donations	14.		0.00
Insurance.	oonanbanono ana rongiouo uonanono			0.00
	ide insurance deducted from your pay or included in lines 4 or 20.			
15a. Life in		15a.	\$	174.00
15b. Healt	h insurance	15b.	\$	0.00
15c. Vehic	cle insurance	15c.	\$	133.00
15d. Other	r insurance. Specify: Renters Insurance	15d.	\$	18.00
Taxes. Do n Specify:	not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
	or lease payments:			
	payments for Vehicle 1	17a.	·	539.00
	payments for Vehicle 2	17b.	·	0.00
17c. Other		17c.	·	0.00
17d. Other	· · ·	17d.	\$	0.00
	ents of alimony, maintenance, and support that you did not report a rom your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I)		\$	0.00
	nents you make to support others who do not live with you.		\$	0.00
Specify:	,	19.	*	0.00
	property expenses not included in lines 4 or 5 of this form or on Sch	nedule I: Yo	our Income.	
20a. Morto	gages on other property	20a.	\$	0.00
20b. Real	estate taxes	20b.	\$	0.00
20c. Prope	erty, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maint	tenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Home	eowner's association or condominium dues	20e.	•	0.00
Other: Spe	cify:	21.	+\$	0.00
Calculate v	our monthly expenses			
•	les 4 through 21.		\$	3,321.43
	ine 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add lin	e 22a and 22b. The result is your monthly expenses.		\$	3,321.43
	, , ,		· —	0,021110
	your monthly net income.	00-	<b>c</b>	0.000.05
	line 12 (your combined monthly income) from Schedule I.	23a.	·	3,938.65
23D. Copy	your monthly expenses from line 22c above.	23b.	- <b>Ф</b>	3,321.43
	act your monthly expenses from your monthly income. esult is your monthly net income.	23c.	\$	617.22
For example,	bect an increase or decrease in your expenses within the year after y do you expect to finish paying for your car loan within the year or do you expect yo o the terms of your mortgage?			or decrease because of a

Fill in this infor	mation to identify your	case:		
Debtor 1	Dennis M. Schran	nm		
	First Name	Middle Name	Last Name	
Debtor 2	Kathleen J. Schra	ımm		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS	
Case number (if known)				☐ Check if this is an amended filing
Official Forr	m 106Dec			
		n Individua	l Debtor's Schedu	les 12/15
years, or both. 1	8 U.S.C. §§ 152, 1341, 1		interproy case can result in filles up	to \$250,000, or imprisonment for up to 20
Did you pa	y or agree to pay some	one who is NOT an atto	rney to help you fill out bankruptcy	forms?
■ No				
☐ Yes. I	Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the sur	nmary and schedules filed with this	declaration and
X /s/ Der	nnis M. Schramm		X /s/ Kathleen J. Schr	amm
	s M. Schramm		Kathleen J. Schram	m
Signatu	re of Debtor 1		Signature of Debtor 2	
Date _	September 13, 2016		Date September 13	<b>3</b> , 2016

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Fill in	this infor	nation to identify you	r case:					
Debto		Dennis M. Schra						
Debio		First Name	Middle Name	La	st Name			
Debto	r 2	Kathleen J. Schi	ramm					
(Spouse	if, filing)	First Name	Middle Name	La	st Name			
United	l States Ba	inkruptcy Court for the:	NORTHERN DISTRICT	OF ILLING	DIS			
Case (if known	number _						_	heck if this is an mended filing
Stat Be as o	ement	and accurate as possi	Affairs for Indivible. If two married people attach a separate sheet to stion.	are filing	together, both are	equally responsi		
Part 1		,	arital Status and Where Yo	ou Lived B	efore			
1. W	hat is you	r current marital statu	ıs?					
	Married Not ma							
2. D	uring the I	ast 3 years, have you	lived anywhere other than	n where yo	ou live now?			
	- I N.		•	-				
_	l No l Yes Lis	st all of the places you l	ived in the last 3 years. Do	not include	where you live now	ı		
		, ,	,		•			
C	Debtor 1 P	rior Address:	Dates Debtor lived there	1	Debtor 2 Prior Ac	ldress:		Dates Debtor 2 lived there
			ver live with a spouse or lo lifornia, Idaho, Louisiana, N					
	l No							
_		ake sure vou fill out Scl	nedule H: Your Codebtors (	Official For	m 106H).			
			(					
Part 2	Expla	in the Sources of You	r Income					
Fi	II in the tota	al amount of income yo	nployment or from operat u received from all jobs and have income that you rece	d all busine	sses, including part	-time activities.	vious calen	ndar years?
	No Yes. Fil	I in the details.						
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.		income e deductions and ions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)

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ebtor 2 K	athleen J.	Schramm				Cas	e number (if known)		
Did you receive any other income during this year or the two previous calendar years?  Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.									
List each	source and	the gross inc	ome from ea	nch source separa	ately. Do	not include income t	hat you listed in lin	e 4.	
□ No									
_	. Fill in the de	etails.							
			Debtor 1				Debtor 2		
					each (before	source re deductions and			Gross income (before deductions and exclusions)
		31, 2015 )	Social Social Services			\$37,999.80	Social Securi	ity	\$9,264.00
			Social So Pension			\$37,999.80	Social Securi	ity	\$9,264.00
■ Yes	During the No. Yes	e 90 days bef Go to line List below paid that c not include to adjustmen or Debtor 2 e 90 days bef Go to line List below include pa	ore you filed 7. each creditor reditor. Do note payments to the on 4/01/19 or both have ore you filed 7. each creditor yments for do	for bankruptcy, d or to whom you pa ot include paymed o an attorney for to and every 3 year e primarily const for bankruptcy, d or to whom you pa omestic support of	id you pa id a total nts for do this banki rs after th umer del id you pa id a total	y any creditor a total of \$6,425* or more imestic support obliquately case. at for cases filed on ots.  y any creditor a total of \$600 or more and	in one or more pay gations, such as che or after the date out of \$600 or more?	ments and the ild support and fadjustment.	d alimony. Also, do creditor. Do not
Credito	r's Name an	d Address		Dates of payme	ent	Total amount	Amount you	Was this pa	yment for
Insiders in of which a business alimony.  No Yes	nclude your you are an o ss you opera . List all payr	relatives; any fficer, directo te as a sole p ments to an i	/ general par or, person in o oroprietor. 11	tners; relatives of control, or owner I U.S.C. § 101. In	any geno of 20% of clude pay	nt on a debt you or eral partners; partner more of their voting	wed anyone who rships of which you g securities; and ar	u are a genera ny managing a s, such as chil	al partner; corporations gent, including one fo
	Did you Include in and other winnings List each Site of No Yes  or last cale anuary 1 to or the cale a	Did you receive any Include income regard and other public bene winnings. If you are fill List each source and I No Yes. Fill in the description of the calendar year: anuary 1 to December or the calendar year beanuary 1 to December or the calendar year.  Are either Debtor 1's Neither Dindividual During the Yes.  Yes. Debtor 1 to During the No. Yes.  Creditor's Name an Outline your of which you are an or a business you opera alimony.  No Yes. List all payr	Include income regardless of whet and other public benefit payments winnings. If you are filing a joint call List each source and the gross income and the gross include a to gross and the gross include a to gross in	Did you receive any other income during the Include income regardless of whether that income and other public benefit payments; pensions; rewinnings. If you are filing a joint case and you have been also and you have a possible from the case of the calendar year:  anuary 1 to December 31, 2015)  The calendar year before that:  anuary 1 to December 31, 2014)  The calendar year before that:  anuary 1 to December 31, 2014)  The calendar year before that:  anuary 1 to December 31, 2014)  The calendar year before that:  anuary 1 to December 31, 2014)  The calendar year before that:  anuary 1 to December 31, 2014)  The calendar year before that:  anuary 1 to December 31, 2014)  The calendar year before that:  anuary 1 to December 31, 2014)  The calendar year before that:  anuary 1 to December 31, 2014)  The calendar year before that:  Social Secondar S	Did you receive any other income during this year or the twinclude income regardless of whether that income is taxable. Exand other public benefit payments; pensions; rental income; inte winnings. If you are filing a joint case and you have income that List each source and the gross income from each source separated in the details.    Debtor 1	Did you receive any other income during this year or the two previous include income regardless of whether that income is taxable. Examples on and other public benefit payments; pensions; rental income; interest; divide winnings. If you are filing a joint case and you have income that you receive winnings. If you are filing a joint case and you have income that you receive winnings. If you are filing a joint case and you have income that you receive winnings. If you are filing a joint case and you have income that you receive winnings. If you are an offer and are filing a joint case and you have income that you receive winnings. If you are an offer and are filing a joint case and you have income that you have before you filed for Bankrup and Pension.  Debtor 1  Social Security and Pension  Social Security and Pension  Social Security and Pension  The calendar year before that: Anuary 1 to December 31, 2015)  Social Security and Pension  The calendar year before that: Anuary 1 to December 31, 2014)  Social Security and Pension  Social Security and Pension  The calendar year before that: Anuary 1 to December 31, 2015)  Social Security and Pension  Social Security and Pension  The calendar year before that: Anuary 1 to December 31, 2015)  Social Security and Pension  Social	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are a and other public benefit payments; pensions; rental income; interest; dividends; money collect winnings. If you are filling a joint case and you have income that you received together, list it or the case of the provided payments. The provided income that you received together, list it or the case of income and you have income that you received together, list it or list of the provided payments.    Debtor 1	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child supp and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; winnings. If you are filing a joint case and you have income that you received together, list to nly once under De List each source and the gross income from each source separately. Do not include income that you listed in line of the case of income pescribe below.    Debtor 1	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Sec and other public benefit payments, pensions; rental income; interest, dividends, money collected from lawauis, royalties, and winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.  List each source and the gross income from each source separately. Do not include income that you listed in line 4.  No Yes. Fill in the details.    Debtor 1

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De	btor 2 Kathleen J. Schramm		Cas	se number (if known)					
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or continuous payments.		ments or transfer a	any property on ac	count of a de	ebt that benefited an			
	■ No								
	☐ Yes. List all payments to an insider								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include credi	this payment itor's name			
Pa	rt 4: Identify Legal Actions, Repossessio	ns, and Foreclosures	•						
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.								
	■ No								
	Yes. Fill in the details.								
	Case title Case number	Nature of the case	Court or agency		Status of the	e case			
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		erty repossessed, f	oreclosed, garnis	hed, attached	I, seized, or levied?			
	■ No. Go to line 11. □ Yes. Fill in the information below.								
	Creditor Name and Address	<b>Describe the Property</b>		Date		Value of the			
		Explain what happened	d			property			
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?  No Yes. Fill in the details.								
	Creditor Name and Address	Describe the action the	creditor took	Date a	action was	Amount			
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?								
	No								
	☐ Yes								
Pa	rt 5: List Certain Gifts and Contributions								
13.	Within 2 years before you filed for bankrup ■ No	otcy, did you give any gift	s with a total value	of more than \$60	) per person?	,			
	Yes. Fill in the details for each gift.								
	Gifts with a total value of more than \$600 per person	Describe the gifts	Describe the gifts			Value			
	Person to Whom You Gave the Gift and Address:								
14.	Within 2 years before you filed for bankru		s or contributions v	with a total value o	of more than	\$600 to any charity?			
	Yes. Fill in the details for each gift or con								
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you	u contributed	Dates	s you ibuted	Value			
Pa	rt 6: List Certain Losses								

Debtor 1

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

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Name of trust

Yes. Fill in the details.

Description and value of the property transferred

beneficiary? (These are often called asset-protection devices.)

Date Transfer was

made

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Debtor 1 Dennis M. Schramm
Debtor 2 Kathleen J. Schramm

Case number (if known)

Pa	rt 8:	List of Certain Financial Accounts, Ir	nstrur	ments, Safe Depos	it Boxes, and St	orage Unit	ts		
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.								
		No Yes. Fill in the details.							
		me of Financial Institution and dress (Number, Street, City, State and ZIP de)		st 4 digits of count number	Type of account instrument	int or	Date account was closed, sold, moved, or transferred		Last balance before closing or transfer
21.		Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
		No Yes. Fill in the details.							
		me of Financial Institution dress (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number, State and ZIP Code)		Describe	the contents		Do you still have it?
22.	Hav	ve you stored property in a storage unit	or pl	ace other than you	r home within 1	year befo	re you filed for bankrupto	cy?	
		No Yes. Fill in the details.							
		me of Storage Facility dress (Number, Street, City, State and ZIP Code)		Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents		Do you still have it?
Pa	rt 9:	Identify Property You Hold or Contro	l for s	ĺ					
23.	,	you hold or control any property that so someone.	omeo	ne else owns? Inc	lude any propert	y you bor	rowed from, are storing f	or,	or hold in trust
		No Yes. Fill in the details.							
		vner's Name  dress (Number, Street, City, State and ZIP Code)		Where is the pro (Number, Street, City,		Describe	the property		Value
Pai	rt 10:		forma	Code)					
		ourpose of Part 10, the following definit							
	toxi	vironmental law means any federal, static ic substances, wastes, or material into t ulations controlling the cleanup of thes	the ai	ir, land, soil, surfac	e water, ground	• .			
		e means any location, facility, or proper own, operate, or utilize it, including disp	-		environmental l	aw, wheth	er you now own, operate	∍, o	r utilize it or used
		cardous material means anything an envardous material, pollutant, contaminant			as a hazardous	waste, ha	zardous substance, toxi	c sı	ubstance,
Rep	ort a	all notices, releases, and proceedings th	nat yo	ou know about, reg	ardless of when	they occu	urred.		
24.	Has	any governmental unit notified you tha	at you	ı may be liable or p	ootentially liable	under or i	n violation of an environ	me	ntal law?
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental un Address (Number, ZIP Code)		_	onmental law, if you it		Date of notice
				,					

Entered 09/13/16 11:32:54 Case 16-82148 Doc 1 Filed 09/13/16 Desc Main Page 36 of 47 Document Debtor 1 Dennis M. Schramm Kathleen J. Schramm Debtor 2 Case number (if known) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Employer Identification number Business Name** Describe the nature of the business **Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Dennis M. Schramm /s/ Kathleen J. Schramm Dennis M. Schramm Kathleen J. Schramm Signature of Debtor 1 Signature of Debtor 2 Date September 13, 2016 Date **September 13, 2016** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No

\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Statement of Financial Affairs for Individuals Filing for Bankruptcy

☐ Yes. Name of Person

Official Form 107

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Debtor 1 Dennis M. Schramm

Kathleen J. Schramm

Case number (if known)

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Fill in this infor	Fill in this information to identify your case:							
Debtor 1	Dennis M. Schrar							
	First Name	Middle Name	Last Name					
Debtor 2	Kathleen J. Schra	amm						
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS					
Case number _				☐ Check if this is an amended filing				

#### Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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	otor 1 otor 2			Schramm . Schramm				Case number (#	f known)		
r	name:							erty and redeem it.		☐ Yes	
	Descrip	otion of	:					erty and enter into a			
	ropert							erty and [explain]:			
S	ecurin	g debt	•								
				expired Personal Prope							
n th	ne info	rmatic	on belo	v. Do not list real estate	e leases. Unexpired lea	ases a	are le		ct; the	Leases (Official Form 100 lease period has not yet 6).	
Des	scribe	your ı	unexpir	ed personal property le	ases				١	Will the lease be assumed	1?
Les	sor's n	name:		Honda Financial					I	□ No	
									ı	Yes	
Pro	perty:	on of le		2015 Honda Oddyss Leased Vehicle	у						
Jnd	ler per	nalty o	f perjur	y, I declare that I have i to an unexpired lease.	ndicated my intention	abou	t any	property of my estate th	hat seci	ures a debt and any perso	onal
X				hramm		X		Kathleen J. Schramm			
			. Schra of Debto					chleen J. Schramm nature of Debtor 2			
	Date	· _s	Septem	ber 13, 2016	_	Da	ite	September 13, 2016			

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
·	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-82148 Doc 1 Filed 09/13/16 Entered 09/13/16 11:32:54 Desc Main Document Page 44 of 47

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

In	Dennis M. Schramm  Real Kathleen J. Schramm		Case No.		
	- talliosi of Gallanin	Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	ISATION OF ATTO	RNEV FOR DE	'RTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(1) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy.	, or agreed to be paid	to me, for services rendered or	:0
	For legal services, I have agreed to accept		\$	1,500.00	
	Prior to the filing of this statement I have received		\$	1,500.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are mem	pers and associates of my law fi	rm.
	☐ I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name	tion with a person or persons was of the people sharing in the	who are not members e compensation is atta	or associates of my law firm. A	<b>L</b>
5.	In return for the above-disclosed fee, I have agreed to ren	nder legal service for all aspec	ts of the bankruptcy c	ase, including:	
	<ul><li>a. Analysis of the debtor's financial situation, and render</li><li>b. Preparation and filing of any petition, schedules, state</li><li>c. Representation of the debtor at the meeting of creditor</li><li>d. [Other provisions as needed]</li></ul>	ment of affairs and plan which	n may be required;		
	Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou	ns as needed; preparation			
5.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.	does not include the following chargeability actions, judi	g service: cial lien avoidanc	es, relief from stay actions	or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any is bankruptcy proceeding.	agreement or arrangement for	r payment to me for re	epresentation of the debtor(s) in	
	September 13, 2016	/s/ Scott A. Bentl	еу		
	Date	Scott A. Bentley Signature of Attorne	ev		
		Law Office of Sc	ott A. Bentley		
		5435 Bull Valley McHenry, IL 6005			
		815-385-0669 Fa	x: 815-578-1068		
		scottbentleylaw@	2gmail.com		
		rvame oj iaw jirm			

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## United States Bankruptcy Court Northern District of Illinois

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Alden Management Service, Inc. 4200 W. Pterson Avenue Chicago, IL 60646

Amazon P.O. Box 960013 Orlando, FL 32896-0013

Barclay Card Services P.O. Box 13337 Philadelphia, PA 19101-3337

Capital One Services P.O. Box 247001 Omaha, NE 68124-7001

Centegra Hospital P.O. Box 6204 Carol Stream, IL 60132

Centegra Hospital P.O. Box 6204 Carol Stream, IL 60132

Citibank 4740 121st. Urbandale, IA 50323

Credit One 585 Pilot Road Las Vegas, NV 89119

H & R Accounts 7017 John Deere Parkway Moline, IL 61266-0672

Home Depot Credit Services P.O. Box 790328 Saint Louis, MO 63179

Honda Financial P.O. Box 5308 Elgin, IL 60121

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Phillips & Cohen Associates, Ltd. 1002 Justison Street Wilmington, DE 19801-5148

Prosper Funding LLC 221 Main Street San Francisco, CA 94105

Walmart Credit Card P.O. Box 530927 Atlanta, GA 30353-0927